

Information Page — Fax Application for Copy of Divorce Certificate

General Instructions

- **Do not** use this application to submit your request *by mail*.
- Use this application if you are the husband or wife named on the divorce certificate.
- If you are **not** the husband or wife named on the divorce certificate, then you must submit with this application a copy of a New York State Court Order requiring the divorce certificate.
- Use this application only if the divorce was granted anywhere in New York State (*including* New York City) on or after January 1, 1963. Contact the county clerk of the county where the divorce was granted for divorces granted prior to January 1, 1963.
- **Do not** use this application for *genealogy requests*.
- **Use only your own credit card:** The applicant's address, i.e., the place where the certificate copy will be mailed, *must* match the address on file with the credit card company.
- Print a copy of this application, complete and sign.
- **Fax** application along with a copy of any required documentation to **1-877-854-4607**.
If you must verify receipt of the fax, please call VitalChek at 1-877-854-4481.

Who is eligible to obtain a divorce certificate copy?

- If the applicant is not the husband or wife, a New York State Court Order is required to obtain a copy of the divorce certificate.
- A copy of the New York State Court Order must be submitted along with the application if the request is being made by someone other than the husband or wife.

Identification Requirements -- Application *must* be submitted with copies of either A or B:

Note: Copy of Passport required if request is made from a foreign country that requires a U.S. Passport for travel.

A. One (1) of the following forms of valid photo-ID:

- Driver license
- Non-Driver Photo-ID Card
- Passport
- Other government issued photo-ID

B. Two (2) of the following showing the applicant's name and address:

- Utility or telephone bills
- Letter from a government agency dated within the last six months

Fees: If no record is on file, a **No Record Certification** is issued and the fee is **not** refunded.

- **Priority Handling:** Faxed requests are given priority handling. The \$45.00 per copy fee includes a \$15.00 priority handling fee. The \$11.95 VitalChek processing fee and the optional \$13.00 FedEx return delivery fee are per transaction.
- **Example:** The fee is \$45.00 per copy + \$11.95 VitalChek processing fee + \$13.00 Federal Express return delivery (optional) – Total for one (1) copy is \$69.95; Total for two (2) copies is \$114.95; etc.

Note: The FedEx fee for USA mainland delivery is \$13.00. Call VitalChek at 1-877-854-4481 for rates to other destinations.

Processing Time

For the latest information on processing times, please visit our web page: www.nyhealth.gov/vital_records/processingtime.htm

Completing the Form

- If you are using Adobe Reader® 5.0 or newer (available as a free download from www.adobe.com) you can fill in the form directly in Adobe Reader by clicking on the appropriate space and entering the information (use the TAB key to move to the next field, shift-TAB to move backwards). Print the completed form and sign.
- You can print out a blank copy of the form and then **type or print** the required information.
- You must give credit card information and it must be **your own card**.
- The form must be **signed** and faxed along with a copy of the documentation of a lawful right or claim, if required (see above).

Please complete, sign and fax with required ID (see instructions) to 1-877-854-4607

You may enter the required information directly into this PDF document (see instruction sheet for details) and print out a copy ready for signature, or print out a blank copy and **print or type** the required information before signing.

Name of Husband:		Date of final Decree or Period Covered by Search:
<div> <div>First</div> <div>Middle</div> <div>Last</div> </div>		<div>Decree issued on</div> <div>or</div> <div>Search from: _____</div> <div>(mm / dd / yyyy)</div>
Address at Time of Decree (Husband):		
<div> <div>Town or City</div> <div>County</div> </div>		<div>Search to: _____</div> <div>(if searching a period) (mm / dd / yyyy)</div>
Name of Wife:		
<div> <div>First</div> <div>Middle</div> <div>Maiden Last</div> </div>		Divorce Certificate No.: (if known)
Address at Time of Decree (Wife):		
<div> <div>Town or City</div> <div>County</div> </div>		Local Registration No.: (if known)
Place Where Marriage License Was Issued:	Date of Marriage:	
<div> <div>Town or City</div> <div>County</div> </div>	(mm / dd / yyyy)	
Purpose for which record is required:	County in Which Divorce Decree Was Filed:	
What is your relationship to person named in the Decree? (If self, state "SELF".)	If attorney, give name and relationship of your client to person whose record is required:	

Submit copy of New York State Court Order, if you are not the husband or wife named in the Decree.

Signature of Applicant:	Date Signed:		
	Month Day Year		
Address of Applicant: _____ <i>(Applicant's Name)</i> _____ <i>(Street)</i> _____ <i>(City) (State) (Zip)</i>	Credit Card & Payment Information:		
	Type of card: _____ Exp. Date: _____		
Credit Card No.: _____			
Priority Handling: \$45.00 x _____ Copies = \$ _____			
VitalChek Fee = \$ _____			
Federal Express = \$ _____ *(Optional)			
Total = \$ _____			
Telephone No.: () _____			
<p>*Add \$13.00 for Federal Express delivery within USA mainland. Call VitalChek at 1-877-854-4481 for rates to other destinations.</p>			